

## AFAFD Standard Operating Procedure 25A

### **Flight For Life Protocols**

- Guidelines for requesting the air-medical ambulance depend on a variety of factors including distance from the hospital, location and number of trauma and heart centers, certification level of pre-hospital care, ground accessibility, and terrain:

#### Anatomic Factors

- Severe penetrating trauma to the head, neck, torso – with shock
- Major amputation above the ankle or wrist
- Major burns associated with trauma
- Paralysis
- Acute airway obstruction or respiratory system compromise

#### Medical Conditions (One or more conditions under “Situational Factors” must also be present)

- Shock
- Unconscious or decreasing level of consciousness
- Exposure to deadly chemicals or toxins
- Hypothermia
- Drowning
- Electrocution

#### Situational Factors

- Prolonged extrication time: 20 + minutes
- Increased ground transport time due to snow, ice, construction, gridlock, etc.
- Rural or isolated areas
- Need for specialized equipment and/or personnel at a disaster scene

#### Mechanism of Injury

- High energy dissipation – rapid deceleration
- Passenger space invaded by 12” or more
- Ejection
- Death of another passenger
- Deformity of a contact point (steering wheel)
- Multiple injured passengers
- Falls from 15 feet or more (consider the surface, was fall broken)
- Child under 12 struck by motor vehicle
- Trauma score of 12 or less
- Glasgow Coma Score of 10 or less

#### Levels of Response

- Standby: Crew moves to aircraft and prepares to launch
- Rapid Response: Aircraft launches and orbits the scene. Will not land until requested
- Immediate Go (Launch): The aircraft launches and responds to the scene